FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION		
	(See instructions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name Example is changed) over the	e: If typying, type lines 12FE	-4M5
John D. Ding	ell for Congress		
ADDRESS (number and			
(Check if address is changed)	Sujte 800	DC	
	CITY▲	STATE	▲ ZIP CODE ▲
COMMITTEE'S E-M/ (Check if address is changed)	AIL ADDRESS (Please provide only one e-mail address) s		
COMMITTEE'S WEE (Check if address is changed)	PAGE ADDRESS (URL) http://www.dingellforcongress	.com	
2. DATE M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER C C00002600			
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete Type or Print Name of Treasurer Guy R. Martin			
Signature of Treasure	Flootronically Filed by Guy P. Mortin	Date	M M / D D D / Y Y Q Y O
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS			
Office Use Only	Fe	r further information contact: deral Election Commission II Free 800-424-9530 cal 202-694-1100	FEC FORM 1 (Revised 02/2009)